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Bib Data Sheet

CONFIRMATION NO. 5921

SERIAL NUMBER 10/665,529	FILING OR 371(c) DATE 09/22/2003 RULE	CLASS 358	GROUP ART UNIT 2625	ATTORNEY DOCKET NO. 1560-0397P	
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** CONTINUING DATA ***** NONE					
** FOREIGN APPLICATIONS ***** JAPAN 2002-276321 09/20/2002					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/12/2003					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <i>Examiner's Signature</i> Initials		STATE OR COUNTRY JAPAN	SHEETS DRAWING 10	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 2
ADDRESS 2292					
TITLE Image forming apparatus and transfer unit					
FILING FEE RECEIVED 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		